Front

Exapro Flash™

(Escitalopram)

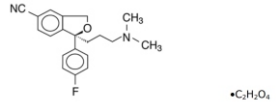
10 mg Tablet

اگزاپرو فلیش

COMPOSITION:
Each orodispersible tablet contains:
Escitalopram Oxalate USP equivalent to
Escitalopram ..... 10 mg.

Product Specs.: Innovator

DESCRIPTION:
Exapro Flash (escitalopram) is an orally administered selective serotonin reuptake inhibitor (SSRI). Escitalopram is the pure S-enantiomer (single isomer) of the racemic bicyclic phthalane derivative citalopram. Escitalopram is designated S-(+)-1-[3-(dimethyl-amino) propyl]-1-(pfluorophenyl)-5-phthalancarbonitrile oxalate with the following structural formula:



The molecular formula is $C_{20}H_{21}FN_2O \cdot C_2H_2O_4$ and the molecular weight is 414.40.

CLINICAL PHARMACOLOGY:
Mechanism of Action:
The mechanism of antidepressant action of escitalopram, the S-enantiomer of racemic citalopram, is presumed to be linked to potentiation of serotonergic activity in the central nervous system (CNS) resulting from its inhibition of CNS neuronal reuptake of serotonin (5-HT). In vitro and in vivo studies in animals suggest that escitalopram is a highly selective serotonin reuptake inhibitor (SSRI) with minimal effects on norepinephrine and dopamine neuronal reuptake. Escitalopram is at least 100-fold more potent than the R-enantiomer with respect to inhibition of 5-HT reuptake and inhibition of 5-HT neuronal firing rate.
Pharmacokinetics:
Absorption and distribution:
Following a single oral dose (20 mg tablet or solution) of escitalopram, peak blood levels occur at about 5 hours. Absorption of escitalopram is not affected by food. The absolute bioavailability of citalopram is about 80% relative to an intravenous dose, and the volume of distribution of citalopram is about 12 L/kg. Data specific on escitalopram are unavailable. The binding of escitalopram to human plasma proteins is approximately 56%.
Metabolism and elimination:
Following oral administrations of escitalopram, the fraction of drug recovered in the urine as escitalopram and S-demethylcitalopram (S-DCT) is about 8% and 10%, respectively. The oral clearance of escitalopram is 600 mL/min, with approximately 7% of that due to renal clearance. In vitro studies using human liver microsomes indicated that CYP3A4 and CYP2C19 are the primary isozymes involved in the N-demethylation of escitalopram.
Pharmacokinetics in Special Populations:
Renal impairment:
In patients with mild to moderate renal function impairment, oral clearance of citalopram was reduced by 17% compared to normal subjects. No adjustment of dosage for such patients is recommended. No information is available about the pharmacokinetics of escitalopram in patients with severely reduced renal function (creatinine clearance < 20 mL/min).
Hepatic impairment:
Citalopram oral clearance was reduced by 37% and half-life was doubled in patients with reduced hepatic function compared to normal subjects. 10 mg is the recommended dose of escitalopram for most hepatically impaired patients
Effects of age, Gender on pharmacokinetics:
Escitalopram pharmacokinetics in subjects ≥ 65 years of age compared to younger subjects in a single-dose and a multiple-dose. Escitalopram AUC and half-life were increased by approximately 50% in elderly subjects, and Cmax was unchanged. 10 mg is the recommended dose for elderly patients. No adjustment of dosage on the basis of gender is needed.

INDICATIONS AND USAGE:
Exapro Flash is a selective serotonin reuptake inhibitor (SSRI) indicated forAcute and Maintenance treatment of Major Depressive Disorder (MDD) in adults and adolescents aged 12-17 years Acute Treatment of Generalized Anxiety Disorder (GAD) in adults

DOSAGE AND ADMINISTRATION:
Administration:
Exapro Flash should generally be administered once daily, morning or evening with or without food
Table: 1 Dosage and administration:

Indication	Recommended Dose
MDD (2.1)	
Adolescents (2.1)	Initial: 10 mg once daily Recommended: 10 mg once daily Maximum: 20 mg once daily
Adults (2.1)	Initial: 10 mg once daily Recommended: 10 mg once daily Maximum: 20 mg once daily
GAD (2.2)	
Adults (2.2)	Initial: 10 mg once daily Recommended: 10 mg once daily

Exapro Flash Tablets administration:
Exparo Flash10 mg tablets are Orodispersible, taken every day, as a single daily dose, with or without food. **Exapro Flash** Flash tablets break easily, so should be handled carefully with dry hands. Patient should be advised to hold the blister strip at the edges and carefully peel off the backing of the strip. The tablet to be placed on your tongue. The tablet will rapidly disintegrate and can be swallowed without water.
Major Depressive Disorder.
Initial treatment:
Adolescents:
The recommended dose of **Exapro Flash** is 10 mg once daily. A flexible-dose trial of **Exapro Flash** (10 to 20 mg/day) demonstrated the effectiveness of **Exapro Flash**. If the dose is increased to 20 mg, this should occur after a minimum of three weeks. Adults The recommended dose of **Exapro Flash** is 10 mg once daily. A fixed-dose trial of **Exapro Flash** demonstrated the effectiveness of both 10 mg and 20 mg of **Exapro Flash**, but failed to demonstrate a greater benefit of 20 mg over 10 mg. If the dose is increased to 20 mg, this should occur after a minimum of one week.

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Maintenance treatment: It is generally agreed that acute episodes of major depressive disorder require several months or longer of sustained pharmacological therapy beyond response to the acute episode. Systematic evaluation of continuing **Exapro Flash** 10 or 20 mg/day in adult patients with major depressive disorder who responded while taking **Exapro Flash** during an 8-week, acute-treatment phase demonstrated a benefit of such maintenance treatment.
Generalized anxiety disorder. The recommended starting dose of **Exapro Flash** is 10 mg once daily. If the dose is increased to 20 mg, this should occur after a minimum of one week.
Maintenance treatment: Generalized anxiety disorder is recognized as a chronic condition. The efficacy of **Exapro Flash** in the treatment of GAD beyond 8 weeks has not been systematically studied. The physician who elects to use **Exapro Flash** for extended periods should periodically re-evaluate the long-term usefulness of the drug for the individual patient.

DOSE MODIFICATION RECOMMENDATIONS:
- No additional benefits seen at 20 mg/day dose.
- 10 mg/day is the recommended dose for most elderly patients and patients with hepatic impairment.
- No dosage adjustment for patients with mild or moderate renal impairment. Use caution in patients with severe renal impairment.
- ***Discontinuing Exapro Flash:*** A gradual dose reduction is recommended.

CONTRAINDICATIONS:
- ***Serotonin syndrome and MAOIs:*** Do not use MAOIs intended to treat psychiatric disorders with **Exapro Flash** or within 14 days of stopping treatment with **Exapro Flash**. Do not use **Exapro Flash** within 14 days of stopping an MAOI intended to treat psychiatric disorders. In addition, do not start **Exapro Flash** in a patient who is being treated with linezolid or intravenous methylene blue
- ***Pimozide:*** Do not use concomitantly
- Contraindicated in case of known hypersensitivity to escitalopram or citalopram or any of the inactive ingredients.

WARNINGS AND PRECAUTIONS:
- ***Clinical worsening/suicide risk:*** Monitor for clinical worsening, suicidality and unusual change in behavior, especially, during the initial few months of therapy or at times of dose changes.
- ***Serotonin syndrome:*** Serotonin syndrome has been reported with SSRIs and SNRIs, including **Exapro Flash**, both when taken alone, but especially when co-administered with other serotonergic agents (including triptans, tricyclic antidepressants, fentanyl, lithium, tramadol, tryptophan, buspirone, amphetamines, and St. John's Wort). If such symptoms occur, discontinue **Exapro Flash** and initiate supportive treatment. If concomitant use of **Exapro Flash** with other serotonergic drugs is clinically warranted, patients should be made aware of a potential increased risk for serotonin syndrome, particularly during treatment initiation and dose increases.
- ***Discontinuation of treatment with Exapro Flash:*** A gradual reduction in dose rather than abrupt cessation is recommended whenever possible
- ***Seizures:*** Prescribe with care in patients with a history of seizure
- ***Activation of Mania/Hypomania:*** Use cautiously in patients with a history of mania
- ***Hyponatremia:*** Can occur in association with SIADH
- ***Abnormal Bleeding:*** Use caution in concomitant use with NSAIDs, aspirin, warfarin or other drugs that affect coagulation
- ***Interference with cognitive and motor performance:*** Use caution when operating machinery
- ***Angle closure glaucoma:*** Angle closure glaucoma has occurred in patients with untreated anatomically narrow angles treated with antidepressants
- ***Use in patients with concomitant Illness:*** Use caution in patients with diseases or conditions that produce altered metabolism or hemodynamic responses.

DRUG INTERACTIONS:
- Concomitant use with SSRIs, SNRIs or Tryptophan is not recommended.
- Use caution when concomitant use with drugs that affect Hemostasis including NSAIDs, Aspirin, Warfarin.
- Monoamine oxidase inhibitor (e.g., phenelzine, tranylcypromine, moclobemide or selegiline) • Pimozide • Linezolid (an antibiotic) • Methylene blue (intravenous).

USE IN SPECIFIC POPULATION:
Pregnancy Category C:
Pregnancy: Use only if the potential benefit justifies the potential risk to the fetus.
Nursing mothers: Caution should be exercised when administered to a nursing woman.
Pediatric use: Safety and effectiveness of **Exapro Flash** has not been established in pediatric MDD patients less than 12 years of age.

ADVERSE REACTIONS:
Most common adverse reaction observed in clinical trials are, insomnia diarrhea, dry mouth, somnolence, dizziness, increased sweating, constipation, fatigue, indigestion Some evidence suggests that SSRIs can cause sexual experiences. Reliable estimates of the incidence and severity of untoward experiences involving sexual desire, performance, and satisfaction are difficult to obtain however female may experience decreased libido, anorgasmia and male patients on SSRIs may experience primary ejaculation delay, decreased libido, impotence. Other reactions observed during the Postmarekting experience include Cardiovascular - hypertension, palpitation. Central and Peripheral Nervous System Disorders - light-headed feeling, migraine. Gastrointestinal Disorders - abdominal cramp, heartburn, gastroenteritis. General - allergy, chest pain, fever, hot flushes, pain in limb. Metabolic and Nutritional Disorders - increased weight. Musculoskeletal System Disorders - arthralgia, myalgia jaw stiffness. Psychiatric Disorders - appetite increased, concentration impaired, irritability. Reproductive Disorders/Female - menstrual cramps, menstrual disorder. Respiratory System Disorders - bronchitis, coughing, nasal congestion, sinus congestion, sinus headache. Skin and Appendages Disorders - rash. Special Senses - vision blurred, tinnitus. Urinary System Disorders - urinary frequency, urinary tract infection.

OVERDOSAGE:
As with other SSRIs, a fatal outcome in a patient who has taken an overdose of escitalopram has been rarely reported. Symptoms may include convulsions, coma, dizziness, hypotension, insomnia, nausea, vomiting, sinus tachycardia, somnolence, and ECG changes (including QT prolongation and very rare cases of torsade de pointes). Acute renal failure has been very rarely reported accompanying overdose. In case of overdose establish and maintain an airway to ensure adequate ventilation and oxygenation. Gastric evacuation by lavage and use of activated charcoal should be considered. Careful observation and cardiac and vital sign monitoring are recommended, along with general symptomatic and supportive care. Due to the large volume of distribution of escitalopram, forced diuresis, dialysis, hemoperfusion, and exchange transfusion are unlikely to be of benefit. There are no specific antidotes for **Exapro Flash**.

INSTRUCTIONS:
- Store below 30°C.
- Protect from heat, sunlight & moisture.
- Keep out of the reach of children.
- To be sold on the prescription of a registered medical practitioner only.

PRESENTATION:
Exapro Flash Tablet 10 mg : Pack of 2 x 7 tablets.

ہدایات:
۳۰ درجہ سینٹی گریڈ سے کم درجہ حرارت پر رکھیں۔
گرمی، دھوپ اور نمی سے بچائیں۔
بچوں کی پہنچ سے دور رکھیں۔
صرف ڈاکٹر کے نسخہ پر فروخت کریں۔

FOR FURTHER INFORMATION PLEASE CONTACT:

Manufactured by:
CCL Pharmaceuticals (Pvt.) Ltd.
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